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|--|-------------------------------------|-----------------------------|--|-------------------------|--------------------------|
| AMENDMENT TRANSMITTAL LETTER (Large Entity) | | | | Docket No. NL 000665 | |
| Applicant(s): Eric P. FUNKE | | | | | |
| Application No. 10/015,831 | Filing Date 11/30/2001 | Examiner Victor KOSTAK | Customer No. | Group Art Unit 2614 | Confirmation No. 5057 |
| Invention: DEVICE AND METHOD FOR SUBFIELD CODING | | | | | |
|  | | | RECEIVED | | |
| | | | SEP 02 2004 Technology Center 2600 | | |
| COMMISSIONER FOR PATENTS: Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 18 - | 20 = | 0 x | \$18.00 | \$0.00 |
| INDEP. CLAIMS | 3 - | 3 = | 0 x | \$86.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. </div> <div style="width: 35%; text-align: right;"> <p>Dated: 1 September 2004</p> </div> </div> <div style="margin-top: 20px;"> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;">  _____ Signature </div> <div style="width: 55%;"> <p>KENNETH D. SPRINGER REG. NO.: 39,843 VOLENTINE FRANCOS, PLLC ONE FREEDOM SQUARE 11951 FREEDOM DRIVE, SUITE 1260 RESTON, VA 20191 TEL. NO.: (703) 715-0870</p> </div> </div> </div> | | | | | |
| <div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. </div> <div style="margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px; text-align: center;"> Signature of Person Mailing Correspondence </div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin-top: 5px;"> Typed or Printed Name of Person Mailing Correspondence </div> </div> | | | | | |
| CC: | | | | | |



**IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE**

Appl. No. : 10/015,831
Applicant(s) : Eric P. FUNKE
Filed : 30 November 2001
TC/A.U. : 2614
Examiner : Victor KOSTAK
Atty. Docket : NL 000665

**CERTIFICATE OF MAILING OR
TRANSMISSION**

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Patent and Trademark Office at 703-

On: _____

By: _____

Title: DEVICE AND METHOD FOR SUBFIELD CODING

AMENDMENT and/or RESPONSE under 37 C.F.R. § 1.111

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Customer Window, Mail Stop Amendment
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Technology Center 2600

Sir:

In response to the non-final Office action of 1 June 2004, please amend the
above referenced application as follows and reconsider the application in light of the
following remarks.

This paper includes (each beginning on a separate sheet):

- 1. Amendments to the specification;**
- 2. Amendments to the claims;**
- 3. Amendments to the drawing figures;**
- 4. Remarks/Discussion of issues;**
- 5. Attached replacement drawing sheet(s).**

Atty. Docket No. NL 000665